File with: lows Ethics and Campaign Disclosure Board

## Reset Form

Des Moines, Iowa 50319 FOR INSTRUCTIONS Fax: 515-281-4073 DISCLOSURE \$	SUMMARY PAGE	MUUL 16 Air	0.44
OMMITTEE NAME (Must be same as on Statement of Organ		<b>]</b>	
	TEMERY ()	FORM	1
Madlom for Supervisor		DR-2	DISCLOSURE
MPORTANT: Indicate by # type of committee you are reporting for: [ 1)Statewide/Legislative/Judge Standing for Retention Candidate (2)	5 State PAC ( 3 )State Party	(Rev. 07/2007)	REPORT
A County Central Committee ( 5 ) County Candidate ( 6 ) City Candida	ate (7)School Board or Other Political	For Office Use On	l N
Subdivision Candidate (8)County PAC (9)City PAC (10)School Bo 11) Local Ballot Isaue	bard of Other Political Subdivision PAC (	Comm.#	<del></del>
CANDIDATE COMMITTEES ONLY:		Logged In	
Candidate Name	Political Party (if applicable)	Scanned	
Jeff Madlom	Republican	Computer	
Office Sought Delaware County Supervisor #1	District (if Senate or House)	Audited	
ate reports are subject to possible civil and criminal penalties. Pur	suant to lown Code sections 68B.32A(7)	and 68A.401(3), the c	andidate, for a
	e presidente pelablic	<u>_</u>	
howk Marllone, Treas	563-927-5294	7-15-08	<b>3</b>
IGNATURE OF PERSON FILING REPORT	TELEPHONE	DATE 8	BIGNED
AM FILING A July 19, 2008	REPORT FOR (1) ELECTION /(2	NON-ELECTION YE	AR.
(recort date)	Indicate by #		
CHECK IF AMENDMENT TO REPORT DATED	na i anaza e di Sayetti beleven pri la <u></u>		
TCHECK IF AMENDMENT TO REPORT DATED	and a series of the series of	cal Committees, enter D	
Check if this is final (termination) report and attach Notice of		November 4,	
	Dissolution Form DR-3.	ounty & Local Committee	
(You must continue to file reports until a DR-3 is filed.	Dissolution Form DR-3.	ounty & Local Committee nich Election is held	
(You must continue to file reports until a DR-3 is filed.)	Dissolution Form DR-3.	ounty & Local Committee	
(You must continue to file reports until a DR-3 is filed.	Dissolution Form DR-3.	ounty & Local Committee nich Election is held	
(You must continue to file reports until a DR-3 is filed.  STATEMENT OF CASH ON HAND  CASH ON HAND at the beginning of the reporting period. (Tot	Dissolution Form DR-3.	ounty & Local Committee nich Election is held	
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STATEMENT OF CASH ON HAND  STATEMENT OF CASH ON HAND  CASH ON HAND at the beginning of the reporting period. (Tot  committee. This amount MUST be the same as the c  of the last reporting period or must be zero if this is fin  ADD TOTAL MONEY TAKEN IN THIS PERIOD  Schedule A: Cash Contributions total (Attach Schedule  Schedule F: Loans Received total (Attach Schedule I  Schedule H: Total Sales of Campaign Property (Attac  (Schedule H applies to Candidates' Comm  SUBTRACT TOTAL MONEY SPENT THIS PERIOD  Schedule B: Expenditures total (Attach Schedule B)  Schedule F: Loan Repayments total (Attach Schedule B)	Dissolution Form DR-3.  Common Market	surity & Local Committee inch Electron is held Delaware  \$	350.00 -0- -0- 391.30
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STATEMENT OF CASH ON HAND STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Tot committee. This amount MUST be the same as the c of the last reporting period or must be zero if this is fin ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule Schedule F: Loans Received total (Attach Schedule I Schedule H: Total Sales of Campaign Property (Attac (Schedule H applies to Candidates' Comm SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) Schedule F: Loan Repayments total (Attach Schedule CASH ON HAND at the end of this reporting period (if final rep "UNPAID BILLS (From Schedule D - Attach Schedule D) "IN KIND CONTRIBUTIONS (From Schedule F - Attach Schedule "OUTSTANDING LOANS (From Schedule F - Attach Schedule")"	Dissolution Form DR-3.  Common Market	surity & Local Committee inch Election is held Delaware  \$ 1,1	341.30 350.00 -0- -0- 391.30 031.30 -0- 360.00 229.87 115.25 500.00
STATEMENT OF CASH ON HAND  STATEMENT OF CASH ON HAND  CASH ON HAND at the beginning of the reporting period. (Tot committee. This amount MUST be the same as the o of the last reporting period or must be zero if this is fin ADD TOTAL MONEY TAKEN IN THIS PERIOD  Schedule A: Cash Contributions total (Attach Schedule I Schedule F: Loans Received total (Attach Schedule I Schedule H: Total Sales of Campaign Property (Attac (Schedule H applies to Candidates' Comm  SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) Schedule F: Loan Repayments total (Attach Schedule B)  Schedule F: Loan Repayments total (Attach Schedule CASH ON HAND at the end of this reporting period (if final rep  "UNPAID BILLS (From Schedule D - Attach Schedule D)  "IN KIND CONTRIBUTIONS (From Schedule F - Attach Schedule CONSULTANT BREAKDOWN (Schedule G Attached?)	Dissolution Form DR-3.  Common Market	surity & Local Committee uch Election is held Delaware  \$ 1,1	341.30 350.00 -0- -0- 391.30 -0- 360.00 229.87 115.25
STATEMENT OF CASH ON HAND  STATEMENT OF CASH ON HAND  CASH ON HAND at the beginning of the reporting period. (Tot committee. This amount MUST be the same as the c of the last reporting period or must be zero if this is fin ADD TOTAL MONEY TAKEN IN THIS PERIOD  Schedule A: Cash Contributions total (Attach Schedule Schedule F: Loans Received total (Attach Schedule Schedule H: Total Sales of Campaign Property (Attac (Schedule H applies to Candidates' Comm  SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) Schedule F: Loan Repayments total (Attach Schedule B) Schedule F: Loan Repayments total (Attach Schedule CASH ON HAND at the end of this reporting period (if final rep  "UNPAID BILLS (From Schedule D - Attach Schedule D)  "IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule CONSULTANT BREAKDOWN (Schedule G Attached?)  CANDIDATE COMMITTEES ONLY:	al of all funds held by the ash on hand at the end st report filed.)  Lile A) (*also see in-kind below)  Ch Schedule H)	surity & Local Committee inch Election is held Delaware  \$ 1,1	341.30 350.00 -0- -0- 391.30 -0- 360.00 229.87 115.25
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ONTRIBUTION	ons, See Back of F ONS MONEY TA	EN IN	SCHED A (Rev. 0	MONETA	
		s on Statement of Organization)		CHECK THIS BO	
Mad1	om for Supe	visor			
SCLOSURE BOA OTE: ANY PER ESPONSIBILITI AUTION: Sect	RD.  SON, OTHER THAN AN ES AND SHOULD IMME	UTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTINE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM NOIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR ON MATELY CONTACT THE BOARD.  If the use of information copied from reports and statements for statutory political committees.	AMPAIGN M	AY HAVE FILING	
DATE RECEIVED (NIM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	τος	ATIONSHIP ANDIDATE* applicable)	AMOUNT RECEIVED	√ IF F FUN RAIS INÇO
/5/08	ID# CK#	Jeff Madlom 713 East Howard Street Sa Manchester, Iowa 52057	ame	\$ 500.00	
/15/08	CK#	Fred & Judy Vorwald   18 North Franklin Street Manchester, Iowa 52057		50.00	
/7/08	ID# CK#	Jeff Madlom 713 East Howard Street Sa Manchester, Iowa 52057	ame	300.00	
	ID# CK#				
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	CK#			:	
	ID# CK#				
	ID# CK#		:		
	ID# CK#		:	:	
	CK#				
		SUB TOTAL (if lest page of thi	-TOTAL	\$ 850.00	

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter 'not applicable' in the relationship column.

Page 1 of 1 (for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

## EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

C	DMMITTEE	NAME	(Must be	same as	on Stateme	ent of Organ	nizetion)

Madlom for Supervisor

DATE EXPENDED WM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	(DESCRIBE TRANSACTION)	EXPENDED
6/4/08	ID# CK#	Embroidered Images In 415 62nd Street Marion, Iowa 52302	c Magnetic Clips	\$684.08
7/5/08	ID#	Nip & Tuck Sewing 115 Millam Hgts Manchester, Iowa 520	T-shirts 57	347.22
And the second s	ID# CK#			
	CK#			
	iD# CK#			

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page	1	of	1	

TOTAL (If last page of this schedule)

\$1031.30

		SEE BACK	

COMMITTEE NAME (Must be same as on Statement of Organization)		D INCURRED (Rev 08/98) INDEBTEDNESS	•
Madlom for Supervisor  NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.	Resst Form	CHECK THIS BOX IF AMENDING FORM	-
			_

## **DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD** (DO NOT INCLUDE LOANS - SHOW LOANS ON SCHEDULE F)

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
6/25/08	Victory Store 5200 SW 30th Street Manchester, Iowa 52057	Pencils	\$ 229.87
		SUB-TOTAL	\$ 229.87
	TOTAL DEBTS OWED BY COMMITTEE AT 1	THE END OF THIS REPORTING PERIOD	\$229.87

"if actual figure is unknown, show "estimated" beside the figure.

of ] (for Schedule D)

CANDIDATE COMMITTEES NOTE:

\*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUC	CTIONS, SEE BACK OF	FORM			SCHEDULE	
COMMITTE	E NAME (Must be same	as on Statement of Organiza	tion)		(Rev. 06/97)	IN-KIND CONTRIBUTIONS
Mad1	om for Supe	rvisor		Reset Form	CHECK 1	HIS BOX IF NG FORM
DATE RECEIVED (MM/DD/YR)	NAME A OF CO	ND ADDRESS NTRIBUTOR	RELATIONSHIP TO CANDIDATE " (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
7/03/08	Cheryl Mad 713 East H Manchester	oward Street	Spouse	Parade Candy & etc.	<b>9</b> 0~00	
7/14/08	Jeff Madlo 713 East H Manchester	oward Street	Same	Mileage 50 miles @ \$ 50 5	25.25	
				:		
						:
				SUB-TOTAL	\$ 115.25	
				TOTAL (If last page of this schedule)	\$ 115.25	

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule E)

E: This schedu	<i>lle re</i> ports mor	upervisor  ey loaned to the committee w  ASI REPORTING PERIOD \$		ommittee account.	(Rev. 02/08)  CHECK  AMENDI	
TI - MONETA (Original :	RY LOANS R	ECEIVED THIS REPORTING Such as a bank, must be show	PERIOD wn if a third party is involu	· 	idate's personal i	funds.)
DATE RECEIVED (MM/DD/YR)		NAME AND ADDRESS OF (Include Endorser's Name, If		RELATIONSHIP TO CANDIDATE (If Applicable	AMOUNT (	OF LOAN
					\$	
i : :						
(Loans I	FARY LOAN R Forgiven must !	EPAYMENTS MADE THIS R be reported on Schedule E - I	n-kind Contributions.) LENDER	TOTAL (PART I)  RELATIONSHIP TO	\$	REPAID
(MM/DD/YR)		(Include Endorser's Name, If	Applicable)	CANDIDATE* (If Applicable	\$	
-						- - :
						1
		, Fro	TOTAL CASH RE	PAYMENTS (PART II) LOANS FORGIVEN	\$	÷